AF TO

APR 24 2007

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE person are required to respond to a collection of information unless it displays a valid OMB control number.

| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2006 |  |                                 |                     | Complete if Known                    |               |                          |                |            |
|---|--|---------------------------------|---------------------|--------------------------------------|---------------|--------------------------|----------------|------------|
|   |  |                                 |                     |                                      |               | 09/889,321               |                |            |
|   |  |                                 |                     |                                      |               | July 13, 2001            |                |            |
|   |  |                                 |                     |                                      |               | ousuke TAKAHAMA et al.   |                |            |
|   |  |                                 |                     |                                      |               | A. Wehbe                 | VI I/VIVI/V    | it ai.     |
| Applicant claims small entity status. See 37 CFR 1.27   |  |                                 |                     | 7.                                   |               | 632                      |                |            |
| TOTAL AMOUNT OF PAYMENT (\$) 0  |  |                                 |                     | / ut Gritt                           |               | 1671-173265              |                |            |
|   |  | Attorney Docket                 | 71071-173203        |                                      |               |                          |                |            |
| METHOD OF   | PAYMENT (check a                                 | all that apply)                 |                     |                                      |               |                          |                |            |
| Check Credit Card Money Order None Other (please identify):   |  |                                 |                     |                                      |               |                          |                |            |
| x Deposit A   | ccount Deposit Account N                         | umber: 22-0261 De               | posit Acc           | ount Name:                           |               | Venable LLF              | )              |            |
| For the   | above-identified depo                            | sit account, the Dir            | ector is            | hereby authorize                     | ed to: (checl | k all that apply)        |                |            |
| x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee              |  |                                 |                     |                                      |               |                          |                |            |
| Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17                     |  |                                 |                     |                                      |               |                          |                |            |
| FEE CALCU   | LATION (All the fees                             | below are due u                 | pon fili            | ng or may be su                      | bject to a s  | surcharge.)              |                |            |
|   | IG, SEARCH, AND EX                               |                                 |                     |                                      |               | <u> </u>                 |                |            |
|   | FIL  | ING FEES                        | SEA                 | ARCH FEES                            | EXAMIN        | ATION FEES               |                |            |
| Application T   | ype Fee (\$)                                     | Small Entity<br>Fee (\$)        | Fee (\$             | Small Entity Fee (\$)                | Fee (\$)      | Small Entity<br>Fee (\$) | Fees           | Paid (\$)  |
| Utility   | 300  | 150                             | 500                 | 250                                  | 200           | 100                      | 1000           | · uiu (ψ)  |
| Design  | 200  | 100                             | 100                 | 50                                   | 130           | 65                       |                |            |
| Plant   | 200  | 100                             | 300                 | 150                                  | 160           | 80                       |                |            |
| Reissue   | 300  | 150                             | 500                 | 250                                  | 600           | 300                      |                |            |
| Provisional   | 200  | 100                             | 0                   | 0                                    | 0             | 0                        |                |            |
| 2. EXCESS CLAIM FEES Small Ent  |  |                                 |                     |                                      |               |                          |                |            |
| <u>Fee Description</u> Each claim over 20 (including Reissues)  |  |                                 |                     |                                      |               |                          | Fee (\$)<br>50 | Fee (\$)   |
| Each independent claim over 3 (including Reissues)  |  |                                 |                     |                                      |               |                          | 200            | 100        |
| Multiple depen  |  |                                 |                     | 360                                  | 180           |                          |                |            |
| Total Claims  | Claims Extra Claims Fee (\$) Fee                 |                                 | Fee F               | aid (\$) Multiple D                  |               | ltiple Depende           | pendent Claims |            |
| HP = highest numb   | - 20 =x<br>per of total claims paid for, if      | greater than 20.                |                     |                                      | Fee           | · (\$) <u>F</u>          | ee Paid (      | <u>\$)</u> |
| Indep. Claims   | Extra Claims                                     | <del></del>                     |                     | Paid (\$)                            |               |                          |                |            |
|   | - 3 = X<br>per of independent claims pa          | =<br>aid for, if greater than 3 | J.                  |                                      |               |                          |                |            |
| 3. APPLICATION  | ON SIZE FEE<br>ation and drawings ex             | seed 100 sheets of              | nanar               | (avaluding alaatr                    | onically file | d agguenge on            |                |            |
| listings und  | der 37 CFR 1.52(e)), the faction thereof. See 35 | ne application size             | fee du              | e is \$250 (\$125 f                  | onically file | tity) for each ac        | Iditional 5    | <b>0</b>   |
| Total Shee  |  |                                 |                     | dditional 50 or frac                 | tion thereof  | Fee (\$)                 | Fee            | Paid (\$)  |
|   | 100 =  |                                 |                     | (round up to a who                   |               |                          |                |            |
| 4. OTHER FEE(S)   |  |                                 |                     |                                      |               |                          | Fees           | Paid (\$)  |
| Non-English Specification, \$130 fee (no small entity discount)                                       |  |                                 |                     |                                      |               |                          |                |            |
| Other (e.g., 1  | ate filing surcharge):                           |                                 |                     |                                      |               |                          |                |            |
| SUBMITTED BY  |  |                                 |                     |                                      |               |                          |                |            |
| Signature   | CILA   | Mr.                             |                     | Registration No.<br>(Attorney/Agent) | 36,830        | Telephone                | (202) 344-4000 |            |
| Name (Print/Type)   |  |                                 | Date April 24, 2007 |                                      |               |                          |                |            |

848186



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Yousuke TAKAHAMA et al.

Appln. No. 09/889,321

Filed: July 13, 2001

For: METHOD OF ACQUIRING

IMMUNOLOGICAL TOLERANCE

Art Unit: 1632

Examiner: A. Wehbe

Atty. Docket No. 31671-173265

Customer No.

PATENT TRADEMARK OFFICE

## **AMENDMENT**

Mail Stop: AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Office Action issued January 24, 2007, please enter the following amendments and consider the following remarks.

Amendments to the specification begin on page 2.

Amendments to the claims are reflected in the listing of the claims which begins on page 3.

Remarks begin on page 6.

Please charge any fees that may be due or credit any refunds to our deposit account no. 22-0261, and notify the undersigned.